

# LONG BEACH SOCCER REFEREE ASSOCIATION



Founded 1979

Serving throughout Southern California

## Membership Agreement

**PLEASE PRINT CLEARLY**



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Years Officiating \_\_\_\_\_ E-MAIL \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex: \_\_\_\_\_

Referee Grade: USSF \_\_\_\_\_ USSF ID# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

New Referees: Clinic Location \_\_\_\_\_ Date: \_\_\_\_\_ Instructor \_\_\_\_\_

### Policies

1. The L.B.S.R.A. year begins every June with dues collected or deducted from each member annually. Dues are determined by the Board of Directors. New Membership Application Deposit of \$35 must accompany this Membership Agreement (make checks payable to LBSRA). If membership is approved this will be credited towards the Annual Dues. If Membership is not approved the Deposit will be returned.
2. Membership meetings are held at 7 P.M. on the 3<sup>rd</sup> Wednesday of each month Check LBSRA.COM for more information.
3. Members will receive LBSRA information by way of News Letter & Emails.
4. At random meetings, members may participate in free drawings for referee's equipment/clothing.
5. Members shall receive 1 hour of State required instruction at each meeting.
6. Assessment and youth mentor programs are provided.
7. LBSRA Board of Directors meeting is held the 1<sup>st</sup> Monday of each month at 6:30 P.M. but may change because of a Holiday or conflict of meetings/training.
8. L.B.S.R.A. Board of Directors may impose fines on members, when appropriate, after investigation.
9. Driver License required for an adult over 18 years of age Driver License# \_\_\_\_\_
10. Must be currently registered with U.S.S.F. and have completed Live Scan background check with Cal South  
Check Boxes                      Registered                       Live Scan

### Procedures

1. **New members must be interviewed for membership before being assigned any games.**
2. In order to receive games after being interviewed:
  - a) Submit Membership Application Deposit as outlined in Policies #1 above
  - b) Contact an assignor with thier availability.
3. Members will receive payment for games on the field, via US Mail, or at membership/board of directors meeting.
4. Any complaints/conflicts will be resolved by the L.B.S.R.A. Board of Directors and/or President and/or Assignor.

### Obligations

1. Members must attend at least 5 or 8 meetings per year depending on grade of Official.
2. Each member must acquire and maintain a current U.S.S.F. certification.
3. Members must maintain professional appearance by having and wearing/using all the equipment and uniforms required.
4. Members must maintain professional conduct in dealing with players, coaches, spectators and other referees, as the member's behavior represents and reflects on L.B.S.R.A.

I/We the undersigned, have read and agree to abide by the above guidelines and rules.

I/We also agree to accept actions taken for failure to abide by these guidelines and rules.

Referee Name (PRINT CLEARLY) \_\_\_\_\_ Parent Name (If referee is under 18years of age) \_\_\_\_\_

Referee Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

### Email or Mail Forms to:

**Lee Harmon**  
**12654 Molette St**  
**Norwalk CA 90650**  
**(562) 688-7408**  
[socalreferee@gmail.com](mailto:socalreferee@gmail.com)

### **Administrative Use Only**

Registered  Live Scan

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## Application Review



NAME: \_\_\_\_\_

- 1) Years of refereeing experience and what organization?
- 2) Present assigner and phone number? Can we ask for a referral?
- 3) How did you hear about the organization?
- 4) What are your short and long term goals for yourself in refereeing?
- 5) Describe some quality or qualities that you will bring into the organization to make it better through your efforts?
- 6) Would you be willing to travel to games for the benefit of the association.
- 7) Will you work with inexperienced referees to assist them later in you career as you advance?
- 8) Would you be willing to maintain your referee grade for a longer period of time to upgrade yourself?
- 9) Why did you get into refereeing and why do you want to stay into this type of profession?
- 10) How committed will you be to assist in making this organization a quality oriented group?

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## Parent Consent and Indemnity



To: The Board of Directors

Long Beach Soccer Referee Association Group

I, \_\_\_\_\_ being the mother/father/legal guardian of  
\_\_\_\_\_  
\_\_\_\_\_ a member of the Long Beach Soccer Referee Association group, hereby  
request you to allow/ him/her to take part in refereeing/ assignment to be held at \_\_\_\_\_  
from \_\_\_\_\_ to \_\_\_\_\_.

I hereby appoint and authorize the member in-charge to act in place as parent with full authority to consent to my son/  
daughter undergoing surgical or other medical treatment. I undertake to pay the cost of such treatment. I fully understand and  
accept that all activities are undertaken at my son's/daughter's own risk.

I am aware that neither the Long Beach Soccer Referee Association nor its Members accept responsibility for any loss,  
injury that the person or property of my son/daughter may sustain while engaged in any activity on the course and I waive  
any right that I or my son/daughter may have to claim compensation against the Long Beach Soccer Referee Association or  
any of its Members in respect of any loss, injury, or damage incurred while engaged in any activity as a referee however  
arising and whether as a result of negligence or otherwise and I indemnify them against all such claims.

ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_

*Mother/Father/legal guardian*

Insurance Company: \_\_\_\_\_

Number: \_\_\_\_\_